

FORM DS-10 2-10-47	DEPARTMENT OF STATE	TE 12/30/55																																														
REFERENCE SLIP																																																
TO: CIA - Mr. [REDACTED]																																																
<table border="1"> <tr> <td><input type="checkbox"/> ADVISE</td> <td><input type="checkbox"/> NOTE &amp; FORWARD</td> </tr> <tr> <td><input type="checkbox"/> APPROVE &amp; RETURN</td> <td><input type="checkbox"/> NOTE &amp; RETURN</td> </tr> <tr> <td><input type="checkbox"/> AS YOU REQUESTED</td> <td><input type="checkbox"/> PER TELEPHONE TALK</td> </tr> <tr> <td><input type="checkbox"/> ATTACH FILE</td> <td><input type="checkbox"/> PREVIOUS CORRESPON.</td> </tr> <tr> <td><input type="checkbox"/> ATTENTION</td> <td><input type="checkbox"/> PRIORITY ACTION</td> </tr> <tr> <td><input type="checkbox"/> COMMENT &amp; RETURN</td> <td><input type="checkbox"/> RECONSIDER</td> </tr> <tr> <td><input type="checkbox"/> CONSIDER</td> <td><input type="checkbox"/> RECOMMEND ACTION</td> </tr> <tr> <td><input type="checkbox"/> COPYING</td> <td><input type="checkbox"/> RECORD</td> </tr> <tr> <td><input type="checkbox"/> CORRECT</td> <td><input type="checkbox"/> REPLY</td> </tr> <tr> <td><input type="checkbox"/> FILE</td> <td><input type="checkbox"/> RETURN TO SENDER</td> </tr> <tr> <td><input type="checkbox"/> FOLLOW-UP</td> <td><input type="checkbox"/> REWRITE</td> </tr> <tr> <td><input type="checkbox"/> FOR YOUR INFORMATION</td> <td><input type="checkbox"/> SEE ME</td> </tr> <tr> <td><input type="checkbox"/> HOLD</td> <td><input type="checkbox"/> SIGNATURE REQUIRED</td> </tr> <tr> <td><input type="checkbox"/> INITIALS NEEDED</td> <td><input type="checkbox"/> TAKE ACTION</td> </tr> <tr> <td><input type="checkbox"/> INSTRUCT</td> <td><input type="checkbox"/> TRANSFER</td> </tr> <tr> <td><input type="checkbox"/> INVESTIGATE &amp; REPORT</td> <td><input type="checkbox"/> TYPE</td> </tr> <tr> <td><input type="checkbox"/> JUSTIFY</td> <td><input type="checkbox"/> VERIFY</td> </tr> <tr> <td><input type="checkbox"/> KEEP ME ADVISED</td> <td><input type="checkbox"/> REPLY FOR SIGNATURE OF</td> </tr> <tr> <td><input type="checkbox"/> LEGAL MATTER</td> <td></td> </tr> <tr> <td><input type="checkbox"/> MEMO REQUIRED</td> <td></td> </tr> <tr> <td><input type="checkbox"/> NOT INTERESTED</td> <td></td> </tr> <tr> <td><input type="checkbox"/> NOTE &amp; DESTROY</td> <td></td> </tr> <tr> <td><input type="checkbox"/> NOTE &amp; FILE</td> <td></td> </tr> </table>			<input type="checkbox"/> ADVISE	<input type="checkbox"/> NOTE & FORWARD	<input type="checkbox"/> APPROVE & RETURN	<input type="checkbox"/> NOTE & RETURN	<input type="checkbox"/> AS YOU REQUESTED	<input type="checkbox"/> PER TELEPHONE TALK	<input type="checkbox"/> ATTACH FILE	<input type="checkbox"/> PREVIOUS CORRESPON.	<input type="checkbox"/> ATTENTION	<input type="checkbox"/> PRIORITY ACTION	<input type="checkbox"/> COMMENT & RETURN	<input type="checkbox"/> RECONSIDER	<input type="checkbox"/> CONSIDER	<input type="checkbox"/> RECOMMEND ACTION	<input type="checkbox"/> COPYING	<input type="checkbox"/> RECORD	<input type="checkbox"/> CORRECT	<input type="checkbox"/> REPLY	<input type="checkbox"/> FILE	<input type="checkbox"/> RETURN TO SENDER	<input type="checkbox"/> FOLLOW-UP	<input type="checkbox"/> REWRITE	<input type="checkbox"/> FOR YOUR INFORMATION	<input type="checkbox"/> SEE ME	<input type="checkbox"/> HOLD	<input type="checkbox"/> SIGNATURE REQUIRED	<input type="checkbox"/> INITIALS NEEDED	<input type="checkbox"/> TAKE ACTION	<input type="checkbox"/> INSTRUCT	<input type="checkbox"/> TRANSFER	<input type="checkbox"/> INVESTIGATE & REPORT	<input type="checkbox"/> TYPE	<input type="checkbox"/> JUSTIFY	<input type="checkbox"/> VERIFY	<input type="checkbox"/> KEEP ME ADVISED	<input type="checkbox"/> REPLY FOR SIGNATURE OF	<input type="checkbox"/> LEGAL MATTER		<input type="checkbox"/> MEMO REQUIRED		<input type="checkbox"/> NOT INTERESTED		<input type="checkbox"/> NOTE & DESTROY		<input type="checkbox"/> NOTE & FILE	
<input type="checkbox"/> ADVISE	<input type="checkbox"/> NOTE & FORWARD																																															
<input type="checkbox"/> APPROVE & RETURN	<input type="checkbox"/> NOTE & RETURN																																															
<input type="checkbox"/> AS YOU REQUESTED	<input type="checkbox"/> PER TELEPHONE TALK																																															
<input type="checkbox"/> ATTACH FILE	<input type="checkbox"/> PREVIOUS CORRESPON.																																															
<input type="checkbox"/> ATTENTION	<input type="checkbox"/> PRIORITY ACTION																																															
<input type="checkbox"/> COMMENT & RETURN	<input type="checkbox"/> RECONSIDER																																															
<input type="checkbox"/> CONSIDER	<input type="checkbox"/> RECOMMEND ACTION																																															
<input type="checkbox"/> COPYING	<input type="checkbox"/> RECORD																																															
<input type="checkbox"/> CORRECT	<input type="checkbox"/> REPLY																																															
<input type="checkbox"/> FILE	<input type="checkbox"/> RETURN TO SENDER																																															
<input type="checkbox"/> FOLLOW-UP	<input type="checkbox"/> REWRITE																																															
<input type="checkbox"/> FOR YOUR INFORMATION	<input type="checkbox"/> SEE ME																																															
<input type="checkbox"/> HOLD	<input type="checkbox"/> SIGNATURE REQUIRED																																															
<input type="checkbox"/> INITIALS NEEDED	<input type="checkbox"/> TAKE ACTION																																															
<input type="checkbox"/> INSTRUCT	<input type="checkbox"/> TRANSFER																																															
<input type="checkbox"/> INVESTIGATE & REPORT	<input type="checkbox"/> TYPE																																															
<input type="checkbox"/> JUSTIFY	<input type="checkbox"/> VERIFY																																															
<input type="checkbox"/> KEEP ME ADVISED	<input type="checkbox"/> REPLY FOR SIGNATURE OF																																															
<input type="checkbox"/> LEGAL MATTER																																																
<input type="checkbox"/> MEMO REQUIRED																																																
<input type="checkbox"/> NOT INTERESTED																																																
<input type="checkbox"/> NOTE & DESTROY																																																
<input type="checkbox"/> NOTE & FILE																																																
REMARKS:																																																
<p>The attached is forwarded per our conversation for use in drafting a rebuttal to the Yeagley paper for consideration by the ad hoc committee.</p>																																																
<p>FROM: OSS/DC - [REDACTED]</p>																																																

GPO 83-020480

25X1A9A

25X1A9A